South Carolina DEPARTMENT OF HEALTH AND HUMAN SERVICES Post Office Box 8206

Columbia, South Carolina 29202-8206

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MEDICAID BULLETIN

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TO: Providers Indicated

SUBJECT: Medicaid Targeted Case Management (MTCM) services

South Carolina Department of Health and Human Services (SCDHHS) is accepting applications from entities interested in providing Medicaid Targeted Case Management (MTCM) services. Prospective South Carolina Healthy Connections Medicaid providers may apply through an online application. This new process will ensure the security of providers' information and is accessible from any computer that has internet access. Provider enrollment requirements include:

- Companies applying to provide MTCM must have a minimum of four (4) employees.
- Electronic Funds Transfer (EFT) is required for enrollment.
- A National Provider Identifier (NPI) is required for provider enrollment. Providers can apply at https://nppes.com.hhs.gov/NPPES for their NPI free of charge.

SCDHHS will collect a non-refundable application fee of \$532 prior to executing a provider agreement whether upon an initial enrollment, reactivation, revalidation or an enrollment to add a new practice location on a new service. Providers, including ordering/referring, enrolled or reactivated, will be screened according to the provider enrollment and screening requirements. If there are concerns with the application fee, a hardship waiver request may be submitted for review. The enrollment process will not begin until the waiver request is approved by the Centers for Medicaid and Medicare Services (CMS). Please visit http://provider.scdhhs.gov for more information regarding the application fee and the hardship waiver request.

Applying online:

- Visit http://provider.scdhhs.gov to access the online application. The enrollment type is Organization, the provider type is Medical Clinic, the specialty is Social Services and the Subspecialty is Targeted Case Management (TCM).
- Complete the application and accept the terms and conditions of the online application by electronic signature, indicating the provider's agreement to the contents of the participation agreement, the Electronic Funds Transfer Agreement, W-9 and Trading Partner Agreement. Applications can be saved and printed prior to submission. It is highly recommended that providers take advantage of this convenience to ensure all application fields are accurate prior to electronic submission.

It is very important that applicants read and understand the MTCM Provider Manual (https://www.scdhhs.gov/provider-type/targeted-case-management-july-1-2010-edition-posted-71410) to ensure your company meets all of the service requirements prior to submitting the application.

- Section 2 describes the policies and procedures specific to the MTCM service.
- The website is updated on the first of every month to reflect policy changes to the manual.
- To order a printed copy of the provider manual, contact the South Carolina Medicaid Provider Service Center at (888) 289-0709. Charges for printed manuals are based on actual costs of printing and mailing.

Please direct any questions regarding the provider enrollment and screening regulations, to the Provider Service Center at (888) 289-0709, option 4. Please visit http://provider.scdhhs.gov to review provider enrollment Information, Frequently Asked Questions, the Online Enrollment Application Introduction Video (1 minute) and the Online Enrollment Application Visual Guide. This information may be shared with any prospective providers. Thank you for your continued support of the South Carolina Healthy Connections Medicaid Program.

/s/ Anthony E. Keck Director

NOTE: To receive Medicaid bulletins by email, please send an email to bulletin@scdhhs.gov indicating your email address and contact information.

To sign up for Electronic Funds Transfer of your Medicaid payment, please go to the following link for instructions: http://www.scdhhs.gov/dhhsnew/serviceproviders/eft.asp